ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
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| O.I.P.E. CLASSIFIER | | | 11-27-00 |
| FORMALITY REVIEW | (BD) | | 12-500 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| J | Rejected | N | Non-elected |
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| | Allowed | | Interference |
| | (Through numeral) Canceled | | Appeal |
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| Γ. | Claim Date | | | | | | | | | Cla | Claim Date | | | | | | | | [| Cla | im | | Date | | | | | | | | | | | | |
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